Federal Emergency Management Agency
Washington, D.C. 20472

REFUND2.MEM

MEMORANDUM FOR: Sylvia Faulkner, Operating Accountant
                    Reports and Control Branch OC-AC

FROM: Matthew B. Miller, P.E., Chief
                    Hazards Study Branch
                    Mitigation Directorate

SUBJECT: Refund Check, Case No. _____

[Mr./Ms.] **(Name of Requester)** submitted a check, cashier's check, or money order in the amount of $**(Amount of Check)** to obtain a determination for a project in the **[Community Name]**. That check, cashier's check, or money order (copy attached) was forwarded to the Fee-Charge System Administrator on **(Date Sent To FCSA)**.

[USE FOLLOWING PARAGRAPH FOR LOMA REQUEST; FEE REFUNDED BY CHECK]

The submitted request is for a LOMA. Therefore, the request qualifies for exemption from review and processing fees. Please issue a refund check for the amount of $**(Amount To Be Refunded)**, made payable to **(Name of Requester)**. When the check is ready, please mail it to:

(Name and Address of Requester)

[USE FOLLOWING PARAGRAPH FOR LOMA REQUEST; FEE REFUNDED VIA ELECTRONIC FUND TRANSFER]

The submitted request is for a LOMA. Therefore, the request qualifies for exemption from review and processing fees. Please issue a refund, via electronic fund transfer, for the amount of $**(Amount To Be Refunded)**. This transfer is to be made to **(Name of Requester)**, using the bank information shown on the attached check**.**

[USE FOLLOWING PARAGRAPH FOR OVERPAYMENT ON CLOMA REQUEST; FEE REFUNDED BY CHECK]

The review and processing fee submitted is incorrect. The correct review and processing fee for a request of this type is **(Fee Amount)**. Please issue a refund check for the amount of $**(Amount To Be Refunded)**, made payable to **(Name of Requester)**. When the check is ready, please mail it to:

(Name and Address of Requester)

Please issue a refund, via electronic fund transfer, for the amount of $(Amount To Be Refunded). This transfer is to be made to **(Name of Requester),** using the bank information shown on the attached check.

If you have any questions, please contact **(FEMA Coordinator)** of our staff, either by telephone at **(FEMA Coordinator Telephone Number)** or by facsimile at (202) 646-4596.

Attachment

cc: Fee-Charge System Administrator

Appropriation Number: _____

Accounting Classification: _____

Vendor No.: _____

Secondary Reference No.: _____

bcc: MT-TS-HS Chron   MT-TS-HS
        MCC Case File